

U.S. Department of Housing and Urban Development  
Office of Public and Indian Housing

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Small PHA Plan Update - Year 3  
Annual Plan for Fiscal Year: FYE 09/30/2003

Amesbury Housing Authority MA116  
Amesbury, MA 01913

c/o Section 8 Administrative Offices  
Amesbury Housing Authority  
180 Main Street  
Amesbury, MA 01913

**NOTE: THIS PHA PLANS TEMPLATE (HUD 50075) IS TO BE COMPLETED  
IN ACCORDANCE WITH INSTRUCTIONS LOCATED IN APPLICABLE  
PIH NOTICES**

**PHA Plan  
Agency Identification**

**PHA Name:** Amesbury Housing Authority

**PHA Number:** MA116

**PHA Fiscal Year Beginning: (10/01/2002)**

**PHA Plan Contact Information:**

Name: Robert J. Mazzone

Phone: 978-388-2022 x 11

TDD: 1-800-545-1833 Ext.189

Email (if available): AHAexecutive@ci.amesbury.ma.us

**Public Access to Information**

**Information regarding any activities outlined in this plan can be obtained by contacting:  
(select all that apply)**

- Main administrative office of the PHA
- PHA development management offices

**Display Locations For PHA Plans and Supporting Documents**

The PHA Plans (including attachments) are available for public inspection at: (select all that apply)

- Main administrative office of the PHA
- PHA development management offices
- Main administrative office of the local, county or State government
- Public library
- PHA website
- Other (list below)

PHA Plan Supporting Documents are available for inspection at: (select all that apply)

- Main business office of the PHA
- PHA development management offices
- Other (list below)

**PHA Programs Administered:**

Public Housing and Section 8       Section 8 Only      Public Housing Only

**Annual PHA Plan  
Fiscal Year 2001  
[24 CFR Part 903.7]**

**i. Table of Contents**

Provide a table of contents for the Plan, including attachments, and a list of supporting documents available for public inspection. For Attachments, indicate which attachments are provided by selecting all that apply. Provide the attachments name (A, B, etc.) in the space to the left of the name of the attachment. If the attachment is provided as a **SEPARATE** file submission from the PHA Plans file, provide the file name in parentheses in the space to the right of the title.

**Contents**

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**Annual Plan - All pertinent information is contained within the confines of this report or can be viewed at the main Administrative Offices: 180 Main Street Amesbury, MA 01913**

Executive Summary (optional)

Annual Plan Information

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Attachment \_\_: Capital Fund Program Annual Statement

Attachment \_\_: Capital Fund Program 5 Year Action Plan

Attachment \_\_: Capital Fund Program Replacement Housing Factor Annual Statement

Attachment \_\_: Public Housing Drug Elimination Program (PHDEP) Plan

Attachment \_\_: Resident Membership on PHA Board or Governing Body

Attachment \_\_: Membership of Resident Advisory Board or Boards

Attachment \_\_: Comments of Resident Advisory Board or Boards & Explanation of PHA Response (must be attached if not included in PHA Plan text)

Other (List below, providing each attachment name)

**ii. Executive Summary**

[24 CFR Part 903.7 9 (r)]

At PHA option, provide a brief overview of the information in the Annual Plan

**1. Summary of Policy or Program Changes for the Upcoming Year**

In this section, briefly describe changes in policies or programs discussed in last year's PHA Plan that are not covered in other sections of this Update. The Amesbury Housing Authority administers a 62-unit Housing Choice Voucher Program for the Town of Amesbury, Massachusetts. Many changes were implemented with the Initial Annual Plan for FY 2000 and it is our fervent hope to be able to implement many of those changes during the current reporting period ending September 30, 2003.

**2. Capital Improvement Needs**

[24 CFR Part 903.7 9 (g)]

Exemptions: Section 8 only PHAs are not required to complete this component. **x**

A. Yes No: Is the PHA eligible to participate in the CFP in the fiscal year covered by this PHA Plan?

B. What is the amount of the PHAs estimated or actual (if known) Capital Fund Program grant for the upcoming year? \$ \_\_\_\_\_

C. Yes No Does the PHA plan to participate in the Capital Fund Program in the upcoming year? If yes, complete the rest of Component 7. If no, skip to next component.

**D. Capital Fund Program Grant Submissions**

**(1) Capital Fund Program 5-Year Action Plan**

The Capital Fund Program 5-Year Action Plan is provided as Attachment

**(2) Capital Fund Program Annual Statement**

The Capital Fund Program Annual Statement is provided as Attachment

**3. Demolition and Disposition**

[24 CFR Part 903.7 9 (h)]

Applicability: Section 8 only PHAs are not required to complete this section. **x**

1. Yes No: **x** Does the PHA plan to conduct any demolition or disposition activities (pursuant to section 18 of the U.S. Housing Act of 1937 (42 U.S.C. 1437p)) in the plan Fiscal Year? (If ANo@, skip to next component ; if Ayes@, complete one activity description for each development.)

**2. Activity Description**

<b>Demolition/Disposition Activity Description (Not including Activities Associated with HOPE VI or Conversion Activities)</b>
1a. Development name:

1b. Development (project) number:
2. Activity type: Demolition Disposition
3. Application status (select one) Approved Submitted, pending approval Planned application
4. Date application approved, submitted, or planned for submission: (DD/MM/YY)
5. Number of units affected:
6. Coverage of action (select one) Part of the development Total development
7. Relocation resources (select all that apply) Section 8 for     units Public housing for     units Preference for admission to other public housing or section 8 Other housing for     units (describe below)
8. Timeline for activity: a. Actual or projected start date of activity: b. Actual or projected start date of relocation activities: c. Projected end date of activity:

**4. Voucher Homeownership Program**

[24 CFR Part 903.7 9 (k)]

A.  Yes    No:            Does the PHA plan to administer a Section 8 Homeownership program pursuant to Section 8(y) of the U.S.H.A. of 1937, as implemented by 24 CFR part 982 ? (If ANo@, skip to next component; if Ayes@, describe each program using the table below (copy and complete questions for each program identified.)

**B. Capacity of the PHA to Administer a Section 8 Homeownership Program**

The PHA has demonstrated its capacity to administer the program by (select all that apply):

Establishing a minimum homeowner downpayment requirement of at least 3 percent and requiring that at least 1 percent of the downpayment comes from the family's resources

No - Requiring that financing for purchase of a home under its section 8 homeownership will be provided, insured or guaranteed by the state or Federal government; comply with secondary mortgage market underwriting requirements; or comply with generally accepted private sector underwriting standards

Demonstrating that it has or will acquire other relevant experience (list PHA experience, or any other organization to be involved and its experience, below):

Both the executive director and Section 8 Coordinator have solid experience in business accounting practices, underwriting requirements, due diligence and asset and credit management. All of these skills and knowledge are important to the success of a Section 8 Home Purchase Program. The Section 8 Staff person has received additional training through LISC and templates and forms acceptable to HUD were developed from these training sources. Under the terms of the Administrative Policies of the Amesbury and Merrimac Housing Authority only a small percentage (7 units) of the units on our joint portfolio can be converted to home purchase for up to 15 years.

**5. Safety and Crime Prevention: PHDEP Plan**

[24 CFR Part 903.7 (m)]

Exemptions Section 8 Only PHAs may skip to the next component PHAs eligible for PHDEP funds must provide a PHDEP Plan meeting specified requirements prior to receipt of PHDEP funds.

Yes No: Is the PHA eligible to participate in the PHDEP in the fiscal year covered by this PHA Plan?

B. What is the amount of the PHA's estimated or actual (if known) PHDEP grant for the upcoming year? \$ \_\_\_\_\_

C. Yes No Does the PHA plan to participate in the PHDEP in the upcoming year? If yes, answer question D. If no, skip to next component.

D. Yes No: The PHDEP Plan is attached at Attachment \_\_\_\_\_

**6. Other Information**

[24 CFR Part 903.7 9 (r)]

**Resident Advisory Board (RAB) Recommendations and PHA Response**

1. Yes  No: Did the PHA receive any comments on the PHA Plan from the Resident Advisory Boards? Yes, copies of the current PHA Plan Update were printed and sent out to sixty-one (61) program participants. Of that number nine (9) questionnaires were returned and one (1) individual actually attended the public meeting held on Wednesday December 18, 2002 at 7:00 PM in Amesbury at the Housing Authority Offices.
2. If yes, the comments are Attached at Attachment: On Wednesday, December 18, 2002 the AHA Section 8 RAB meeting was held. One program participant out of those 61 who were invited chose to attend at 7:00 PM. A survey was also inserted in the document for those who could not attend the RAB mtg. Those that responded with the survey responded in a

generally positive way and encouraged the Amesbury Housing Authority to seek ways to broaden affordable housing opportunities for Amesbury Residents. For those program participants who read the PHA Plan Update the program offering which held the greatest interest was the Home Ownership Option being explored by the Amesbury Housing Authority.

A sample of those comments received in the mail-back surveys:

“I am grateful to be a part of this program”.

“The waiting list is too long for people who really need the help”.

3. In what manner did the PHA address those comments? (select all that apply)

The PHA changed portions of the PHA Plan in response to comments

A list of these changes is included

Yes **No**: below or

**Yes** No: at the end of the RAB Comments listed above.

Considered comments, but determined that no changes to the PHA Plan were necessary. An explanation of the PHAs consideration is included in paragraph #2, listed above.

Other: (list below)

### **B. Statement of Consistency with the Consolidated Plan**

For each applicable Consolidated Plan, make the following statement (copy questions as many times as necessary).

1. Consolidated Plan jurisdiction: (Amesbury Office of Planning & Development , Amesbury MA )

2. The PHA has taken the following steps to ensure consistency of this PHA Plan with the Consolidated Plan for the jurisdiction: (select all that apply)

The PHA has based its statement of needs of families in the jurisdiction on the needs expressed in the Consolidated Plan/s.

The PHA has participated in any consultation process organized and offered by the Consolidated Plan agency in the development of the Consolidated Plan.

The PHA has consulted with the Consolidated Plan agency during the development of this PHA Plan.

Activities to be undertaken by the PHA in the coming year are consistent with specific initiatives contained in the Consolidated Plan. (list such initiatives below)

Other: (list below)

PHA Requests for support from the Consolidated Plan Agency

Yes  No: Does the PHA request financial or other support from the State or local government agency in order to meet the needs of its public housing residents or inventory? If yes, please list the 5 most important requests below:

The Amesbury Housing Authority requests no assistance from the local jurisdiction (Town of Amesbury) CDBG or HOME funding for the Federal Section 8 Program. Any support received from the Town is for those units that are owned and managed by the AHA under the auspices of Massachusetts State Public Housing Programs.

If any development of housing is performed in Amesbury in cooperation between the local Participating Jurisdiction and the Amesbury Housing Authority, that support will not assist the Section 8 program in any way. Instead, there may be some pre-development expenses requested of the town to address start-up costs for HUD 811 or HUD 202 project applications.

4. The Consolidated Plan of the jurisdiction under the Town of Amesbury Planning & Development Dept. supports the PHA Plan with the following actions and commitments: (describe below). The Agency responsible for the Consolidated Plan for Amesbury, Massachusetts noted full support in their review of the initial PHA Plan for the Year 2000 as presented. This review and support will not be required until submission of the next (fifth) completed plan scheduled for 2005.
5. Key targets of the Town of Amesbury Community Development Department are as follows:
  - A) expanding the supply of affordable housing
  - B) Provide Housing Options for Special Populations to prevent homelessness
  - C) Maintain, Preserve and Improve the affordable housing stock

**C. Criteria for Substantial Deviation and Significant Amendments**

**Amendment and Deviation Definitions**

24 CFR Part 903.7(r)

PHAs are required to define and adopt their own standards of substantial deviation from the 5-year Plan and Significant Amendment to the Annual Plan. The definition of significant amendment is important because it defines when the PHA will subject a change to the policies or activities described in the Annual Plan to full public hearing and HUD review before implementation.

**A. Substantial Deviation from the 5-year Plan: The Amesbury Housing Authority defines a substantial deviation from the Annual Plan as an event which affects at least 20 units in the 62 unit inventory or requires HUD approval (e.g. utilizing Payment Standards in excess of 10% of the Fair Market Rent for the applicable market area.)**

**B. Significant Amendment or Modification to the Annual Plan: If such a deviation occurs in the administration of the AHA 62-unit program, the AHA staff will submit and amendment to HUD for that applicable fiscal year plan.**

**Attachment A**  
**Supporting Documents Available for Review**

PHAs are to indicate which documents are available for public review by placing a mark in the Applicable & On Display column in the appropriate rows. All listed documents must be on display if applicable to the program activities conducted by the PHA.

<b>List of Supporting Documents Available for Review</b>		
<b>Applicable &amp; On Display</b>	<b>Supporting Document</b>	<b>Related Plan Component</b>
Main Administrative Office in Amesbury, MA	PHA Plan Certifications of Compliance with the PHA Plans and Related Regulations	5 Year and Annual Plans
Main Administrative Office in Amesbury, MA	State/Local Government Certification of Consistency with the Consolidated Plan (not required for this update)	5 Year and Annual Plans
Main Administrative Office in Amesbury, MA	Fair Housing Documentation Supporting Fair Housing Certifications: Records reflecting that the PHA has examined its programs or proposed programs, identified any impediments to fair housing choice in those programs, addressed or is addressing those impediments in a reasonable fashion in view of the resources available, and worked or is working with local jurisdictions to implement any of the jurisdictions initiatives to affirmatively further fair housing that require the PHAs involvement.	5 Year and Annual Plans
Joseph Fahey Director of	Housing Needs Statement of the Consolidated Plan for the jurisdiction/s in which the PHA is located and any additional backup data to support statement of housing needs in the jurisdiction	Annual Plan: Housing Needs

<b>List of Supporting Documents Available for Review</b>		
<b>Applicable &amp; On Display</b>	<b>Supporting Document</b>	<b>Related Plan Component</b>
Planning & Development for Town of Amesbury 978-388-8110 x310 62 Friend St. Amesbury, Ma 01913		
Section 8 Only PHA	Most recent board-approved operating budget for the public housing program	Annual Plan: Financial Resources
Section 8 Only PHA	Public Housing Admissions and (Continued) Occupancy Policy (A&O/ACOP), which includes the Tenant Selection and Assignment Plan [TSAP]	Annual Plan: Eligibility, Selection, and Admissions Policies
Section 8 Only PHA	Any policy governing occupancy of Police Officers in Public Housing check here if included in the public housing Administrative and Operating Policy	Annual Plan: Eligibility, Selection, and Admissions Policies
Main Administrative Office in Amesbury, MA	Section 8 Administrative Plan	Annual Plan: Eligibility, Selection, and Admissions Policies
Section 8 Only PHA	Public housing rent determination policies, including the method for setting public housing flat rents check here if included in the public housing A & O	Annual Plan: Rent Determination

<b>List of Supporting Documents Available for Review</b>		
<b>Applicable &amp; On Display</b>	<b>Supporting Document</b>	<b>Related Plan Component</b>
	Policy	
Section 8 Only PHA	Schedule of flat rents offered at each public housing development check here if included in the public housing A & O Policy	Annual Plan: Rent Determination
Main Administrative Office in Amesbury, MA	Section 8 rent determination (payment standard) policies <input checked="" type="checkbox"/> check here if included in Section 8 Administrative Plan	Annual Plan: Rent Determination
Section 8 Only PHA	Public housing management and maintenance policy documents, including policies for the prevention or eradication of pest infestation (including cockroach infestation)	Annual Plan: Operations and Maintenance
Section 8 Only PHA	Results of latest binding Public Housing Assessment System (PHA's) Assessment	Annual Plan: Management and Operations
Section 8 Only PHA	Follow-up Plan to Results of the PHA's Resident Satisfaction Survey (if necessary). SEMAP applies but no PHDEP	Annual Plan: Operations and Maintenance and Community Service & self-sufficiency
Main Administrative Office in Amesbury, MA	Results of latest Section 8 Management Assessment System (SEMAP)	Annual Plan: Management and Operations
Main Administrative Office in Amesbury, MA	Any required policies governing any Section 8 special housing types (Project Based Vouchers & Home Ownership Program) <input checked="" type="checkbox"/> check here if included in Section 8 Administrative Plan	Annual Plan: Operations and Maintenance
Section 8 Only PHA	Public housing grievance procedures check here if included in the public housing A & O Policy	Annual Plan: Grievance Procedures

<b>List of Supporting Documents Available for Review</b>		
<b>Applicable &amp; On Display</b>	<b>Supporting Document</b>	<b>Related Plan Component</b>
Main Office Amesbury, MA	Section 8 informal review and hearing procedures <input checked="" type="checkbox"/> check here if included in Section 8 Administrative Plan	Annual Plan: Grievance Procedures
Section 8 Only PHA	The HUD-approved Capital Fund/Comprehensive Grant Program Annual Statement (HUD 52837) for any active grant year	Annual Plan: Capital Needs
Section 8 Only PHA	Most recent CIAP Budget/Progress Report (HUD 52825) for any active CIAP grants	Annual Plan: Capital Needs
Section 8 Only PHA	Approved HOPE VI applications or, if more recent, approved or submitted HOPE VI Revitalization Plans, or any other approved proposal for development of public housing	Annual Plan: Capital Needs
Main Administrative Office in Amesbury, MA	Self-evaluation, Needs Assessment and Transition Plan required by regulations implementing Section 504 of the Rehabilitation Act and the Americans with Disabilities Act. See, PIH 99-52 (HA).	Annual Plan: Capital Needs
Section 8 Only PHA	Approved or submitted applications for demolition and/or disposition of public housing	Annual Plan: Demolition and Disposition
Section 8 Only PHA	Approved or submitted applications for designation of public housing (Designated Housing Plans)	Annual Plan: Designation of Public Housing
Section 8 Only PHA	Approved or submitted assessments of reasonable revitalization of public housing and approved or submitted conversion plans prepared pursuant to section 202 of the 1996 HUD Appropriations Act, Section 22 of the US Housing Act of 1937, or Section 33 of the US Housing Act of 1937	Annual Plan: Conversion of Public Housing
Section 8 Only PHA	Approved or submitted public housing homeownership programs/plans	Annual Plan: Homeownership
Main Administrative Office in	Policies governing any Section 8 Homeownership program (Section XIV of the AHA/MHA Section 8 Administrative Plan)	Annual Plan: Homeownership

<b>List of Supporting Documents Available for Review</b>		
<b>Applicable &amp; On Display</b>	<b>Supporting Document</b>	<b>Related Plan Component</b>
Amesbury, MA		
Section 8 Only PHA	Cooperation agreement between the PHA and the TANF agency and between the PHA and local employment and training service agencies	Annual Plan: Community Service & Self-sufficiency
Section 8 Only PHA	FSS Action Plan/s for public housing and/or Section 8 No FSS program vouchers in inventory	Annual Plan: Community Service & Self-sufficiency
Section 8 Only PHA	Section 3 documentation required by 24 CFR Part 135, Subpart E No FSS HCV or Federal Public Housing units	Annual Plan: Community Service & Self-sufficiency
Section 8 Only PHA	Most recent self-sufficiency (ED/SS, TOP or ROSS or other resident services grant) grant program reports	Annual Plan: Community Service & Self-sufficiency
Section 8 Only PHA	The most recent Public Housing Drug Elimination Program (PHEDEP) semi-annual performance report	Annual Plan: Safety and Crime Prevention
Section 8 Only PHA No Federal Public Housing	PHDEP-related documentation: § Baseline law enforcement services for public housing developments assisted under the PHDEP plan; § Consortium agreement/s between the PHAs participating in the consortium and a copy of the payment agreement between the consortium and HUD (applicable only to PHAs participating in a consortium as specified under 24 CFR 761.15); § Partnership agreements (indicating specific leveraged support) with agencies/organizations providing funding, services or other in-kind resources for PHDEP-funded activities; § Coordination with other law enforcement efforts; § Written agreement(s) with local law enforcement agencies (receiving any PHDEP funds); and § All crime statistics and other relevant data (including Part I and specified Part II crimes) that establish need for the public housing sites assisted under the PHDEP Plan.	Annual Plan: Safety and Crime Prevention
Section 8	Policy on Ownership of Pets in Public Housing Family	Pet Policy

<b>List of Supporting Documents Available for Review</b>		
<b>Applicable &amp; On Display</b>	<b>Supporting Document</b>	<b>Related Plan Component</b>
Only PHA	Developments (as required by regulation at 24 CFR Part 960, Subpart G) check here if included in the public housing A & O Policy	
Main Administrative Office in Amesbury, MA - copies are sent to HUD, as well.	The results of the most recent fiscal year audit of the PHA conducted under section 5(h)(2) of the U.S. Housing Act of 1937 (42 U. S.C. 1437c(h)), the results of that audit and the PHAs response to any findings	Annual Plan: Annual Audit
Main Administrative Office in Amesbury, MA		Troubled PHAs
	Other supporting documents (optional) (list individually; use as many lines as necessary)	(specify as needed)

Small PHA Plan Update Page 7  
**Table Library**

<b>Annual Statement/Performance and Evaluation Report</b>					
<b>PHA Name:</b>		<b>Grant Tyne and Number</b>			<b>Federal FY of</b>
<b>Original Annual Statement</b>			<b>Reserve for Disasters/ Emergencies Revised Annual Statement</b>		
<b>Line No.</b>	<b>Summary by Development Account</b>	<b>Total Estimated Cost</b>		<b>Total Actual Cost</b>	
		<b>Original</b>	<b>Revised</b>	<b>Obligated</b>	<b>Expended</b>
1	Total non-CFP Funds				
2	1406 Operations				
3	1408 Management Improvements				
4	1410 Administration				
5	1411 Audit				
6	1415 liquidated Damages				
7	1430 Fees and Costs				
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures				
11	1465.1 Dwelling Equipment&Nonexpendable				
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment				
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1498 Mod Used for Development				

<b>Annual Statement/Performance and Evaluation Report</b>					
<b>PHA Name:</b>		<b>Grant Tyne and Number</b>			<b>Federal FY of</b>
<b>Original Annual Statement</b>			<b>Reserve for Disasters/ Emergencies Revised Annual Statement</b>		
<b>Lin e No.</b>	<b>Summary by Development Account</b>	<b>Total Estimated Cost</b>		<b>Total Actual Cost</b>	
19	1502 Contingency				
20	Amount of Annual Grant: (sum of lines 2-19)				
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Compliance				
23	Amount of line 20 Related to Security				
24	Amount of line 20 Related to Energy Conservation Measures				



<b>Annual Statement/Performance and Evaluation Report</b> <b>Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)</b> <b>Part II: Supporting Pages</b>								
PHA Name:		<b>Grant Type and Number</b> Capital Fund Program #: Capital Fund Program Replacement Housing Factor #:				<b>Federal FY of Grant:</b>		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work
				Original	Revised	Funds Obligated	Funds Expended	



<b>Annual Statement/Performance and Evaluation Report</b> <b>Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)</b> <b>Part III: Implementation Schedule</b>							
PHA Name:		<b>Grant Type and Number</b> Capital Fund Program #: Capital Fund Program Replacement Housing Factor #:					<b>Federal FY of Grant:</b>
Development Number Name/HA-Wide Activities	All Fund Obligated (Quart Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates
	Original	Revised	Actual	Original	Revised	Actual	



**Capital Fund Program 5-Year Action Plan**

Complete one table for each development in which work is planned in the next 5 PHA fiscal years. Complete a table for any PHA-wide physical or management improvements planned in the next 5 PHA fiscal year. Copy this table as many times as necessary. Note: PHAs need not include information from Year One of the 5-Year cycle, because this information is included in the Capital Fund Program Annual Statement.

<b>CFP 5-Year Action Plan</b>		
<b>Original statement</b>	<b>Revised statement</b>	
<b>Development Number</b>	<b>Development Name (or indicate PHA wide)</b>	
<b>Description of Needed Physical Improvements or Management Improvements</b>	<b>Estimated Cost</b>	<b>Planned Start Date (HA Fiscal Year)</b>
<b>Total estimated cost over next 5 years</b>		

## PHA Public Housing Drug Elimination Program Plan

**Note: THIS PHDEP Plan template (HUD 50075-PHDEP Plan) is to be completed in accordance with Instructions located in applicable PIH Notices.**

### **Section 1: General Information/History**

**A. Amount of PHDEP Grant \$** \_\_\_\_\_

**B. Eligibility type (Indicate with an Ax@)**      N1 \_\_\_\_\_ N2 \_\_\_\_\_ R \_\_\_\_\_

**C. FFY in which funding is requested** \_\_\_\_\_

### **D. Executive Summary of Annual PHDEP Plan**

In the space below, provide a brief overview of the PHDEP Plan, including highlights of major initiatives or activities undertaken. It may include a description of the expected outcomes. The summary must not be more than five (5) sentences long

### **E. Target Areas**

Complete the following table by indicating each PHDEP Target Area (development or site where activities will be conducted), the total number of units in each PHDEP Target Area, and the total number of individuals expected to participate in PHDEP sponsored activities in each Target Area. Unit count information should be consistent with that available in PIC.

PHDEP Target Areas (Name of development(s) or site)	Total # of Units within the PHDEP Target Area(s)	Total Population to be Served within the PHDEP Target Area(s)

**F. Duration of Program**

Indicate the duration (number of months funds will be required) of the PHDEP Program proposed under this Plan (place an Ax@ to indicate the length of program by # of months. For AOther@, identify the # of months).

**12 Months** \_\_\_\_\_ **18 Months** \_\_\_\_\_ **24 Months** \_\_\_\_\_

**G. PHDEP Program History**

Indicate each FY that funding has been received under the PHDEP Program (place an Ax@ by each applicable Year) and provide amount of funding received. If previously funded programs have not been closed out at the time of this submission, indicate the fund balance and anticipated completion date. The Fund Balances should reflect the balance as of Date of Submission of the PHDEP Plan. The Grant Term End Date should include any HUD-approved extensions or waivers. For grant extensions received, place AGE@ in column or AW@ for waivers.





## **PHDEP Plan Goals and Activities**

In the tables below, provide information on the PHDEP strategy summarized above by budget line item numbered sequentially for each budget line item (where applicable). Use as many rows as necessary to list proposed activities (additional rows may be required to provide information in shaded boxes). Information provided must be concise and not to exceed the number of budget line items in which the PHA has no planned goals or activities may be deleted.

<b>9110 B Reimbursement of Law Enforcement</b>						<b>Total PHDEP Funding: \$</b>	
Goal(s)							
Objectives							
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHDEP Funding	Other Funding (Amount/Source)	
1.							
2.							
3.							

<b>9115 - Special Initiative</b>						<b>Total PHDEP Funding:</b>	
Goal(s)							
Objectives							
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHDEP Funding	Other Funding (Amount/Source)	
1.							
2.							
3.							

<b>9116 - Gun Buyback TA Match</b>						<b>Total PHDEP Funding:</b>	
Goal(s)							
Objectives							
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHDEP Funding	Other Funding (Amount/Source)	
1.							
2.							

<b>9120 - Security Personnel</b>						<b>Total PHDEP Funding:</b>	
Goal(s)							
Objectives							
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHDEP Funding	Other Funding (Amount)	
1.							
2.							
3.							

<b>9130 B Employment of Investigators</b>						<b>Total PHDEP Funding:</b>	
Goal(s)							
Objectives							
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHDEP Funding	Other Funding (Amount)	
1.							
2.							
3.							

<b>9140 B Voluntary Tenant Patrol</b>						<b>Total PHDEP Funding:</b>	
Goal(s)							
Objectives							
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHDEP Funding	Other Funding (Amount)	
1.							
2.							
3.							

9150 - Physical Improvements						Total PHDEP Funding: \$
Goal(s)						
Objectives						
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	Other Funding (Amount/Source)
1.						
2.						
3.						

9160 - Drug Prevention						Total PHDEP Funding: \$
Goal(s)						
Objectives						
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	Other Funding (Amount/Source)
1.						
2.						
3.						

9170 - Drug Intervention						Total PHDEP Funding: \$
Goal(s)						
Objectives						
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	Other Funding (Amount/Source)
1.						
2.						
3.						

9180 - Drug Treatment						Total PHDEP Funding
Goal(s)						
Objectives						
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHDEP Funding	Other Funding (Amount/Source)
1.						
2.						
3.						

9190 - Other Program Costs						Total PHDEP Funds: \$
Goal(s)						
Objectives						
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHDEP Funding	Other Funding (Amount/Source)
1.						
2.						
3.						

**Required Attachment \_\_\_\_ : Resident Member on the PHA Governing Board**

1. Yes x No: Does the PHA governing board include at least one member who is directly assisted by the PHA this year? (if no, skip to #2)

Name of resident member(s) on the governing board: Not applicable

How was the resident board member selected: (select one)?

Elected

Appointed

C. The term of appointment is (include the date term expires):

2. A. If the PHA governing board does not have at least one member who is directly assisted by the PHA, why not?

the PHA is located in a the State of Massachusetts that requires the members of a PHA board to be salaried, considered special municipal employees and serve on a full time basis the PHA has less than 300 public housing units, has provided reasonable notice to the resident advisory board of the opportunity to serve on the PHA board, and has not been notified by any resident of their interest to participate in the Board.

Other (explain):

- B. Date of next term expiration of a governing board member: Not applicable

Name and title of appointing official(s) for governing board (indicate appointing official for the next position):

**Required Attachment A: Membership of the Resident Advisory Board or Boards**

List members of the Resident Advisory Board or Boards: (If the list would be unreasonably long, list organizations represented or otherwise provide a description sufficient to identify how members are chosen.)

The entire mailing list of the 62 current Section 8 recipients were contacted to attend a meeting held to discuss the PHA Plan for FYE 9/30/2003 comprises the content of the Amesbury Housing Authority Resident Advisory Board. Virtually all recipients are notified of the PHA Plan Contents and are sent a copy for their review. A Survey is included in the PHA plan for any comments and suggestions that may be incorporated in the plan. There is no need to publish these names for public review.

It may be convenient for larger public housing authorities with a portfolio of HUD-funded public housing programs to bring residents together for a Resident Advisory Board meeting. But a 62-unit program with vouchers under lease in six communities have difficulty bringing the heads of families together who have employment and child-rearing responsibilities for a RAB meeting during the work week or evenings or on weekends.